

# MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC  
COVER SHEET PG 1

The MPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00069936		2 Total pages filed: 9	
3 COMMITTEE NAME Texas Travel Alliance PAC				<b>OFFICE USE ONLY</b>  Date Received ELECTRONICALLY FILED 04/29/2025  Date Hand-delivered or Date Postmarked  Receipt #                      Amount  Date Processed  Date Imaged	
4 COMMITTEE ADDRESS	ADDRESS / PO BOX;    APT / SUITE #;    CITY;    STATE;    ZIP 203 W. 10th Street 600 AUSTIN, TX 78701				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR                      FIRST                      MI Mr.                      Jay B.				
	NICKNAME                      LAST                      SUFFIX Stewart				
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;    CITY;    STATE;    ZIP CODE 203 W. 10th Street, Suite 600  Austin, TX 78701				
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET ADDRESS OR PO BOX;                      APT / SUITE #;    CITY;    STATE;    ZIP CODE 203 W. 10th Street, Suite 600  Austin, TX 78701				
8 CAMPAIGN TREASURER PHONE	AREA CODE                      PHONE NUMBER                      EXTENSION (512) 479-8888				
9 REPORT TYPE	<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)				
10 MONTHLY REPORT FILING DEADLINE	<input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input checked="" type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5				
11 PERIOD COVERED	Month    Day    Year                      THROUGH                      Month    Day    Year 03/26/2025                      04/25/2025				

GO TO PAGE 2

# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

## FORM MPAC COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Texas Travel Alliance PAC	<b>13 Filer ID</b> (Ethics Commission Filers) 00069936
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b>	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 830.00
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 2,566.77
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 6,144.70
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

**16 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Jay B. Stewart

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

**SUBTOTALS - MPAC****FORM MPAC**  
**COVER SHEET PG 3**  
3 of 9

<b>17 COMMITTEE NAME</b> Texas Travel Alliance PAC		<b>18 Filer ID</b> (Ethics Commission Filers) 00069936
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 830.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 2,566.77
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/5 Rpt: 4/9
<b>2</b> FILER NAME Texas Travel Alliance PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00069936
<b>4</b> Date 04/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Terri <hr/> <b>6</b> Contributor address; City; State; Zip Code  New Braunfels, TX 78132	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Self-employed
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Evan <hr/> Contributor address; City; State; Zip Code  Fulshear, TX 77441	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Pyek Group
Date 04/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bayes, Diann <hr/> Contributor address; City; State; Zip Code  San Angelo, TX 76901	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Visit Tyler
Date 03/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blevins, Johnny <hr/> Contributor address; City; State; Zip Code  Canton, TX 75103	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) President/CEO		Employer (See Instructions) Splash Kingdom Waterparks
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyd, Erika <hr/> Contributor address; City; State; Zip Code  Austin, TX 78739	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) President & CEO		Employer (See Instructions) Texas Travel Alliance

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/5 Rpt: 5/9
<b>2</b> FILER NAME Texas Travel Alliance PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00069936
<b>4</b> Date 04/02/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bybee-Dziedzic, Jessica <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78745	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Vice President of Client Operations		<b>9</b> Employer (See Instructions) Saffire
Date 04/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caufield, Scott <hr/> Contributor address; City; State; Zip Code  Celina, TX 75009	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Senior Principal Client Partner - Destinations		Employer (See Instructions) Tripadvisor
Date 04/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Katherine <hr/> Contributor address; City; State; Zip Code  Round Rock, TX 78681	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) VP Strategic Services		Employer (See Instructions) Zartico
Date 03/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danesi, Kimberly <hr/> Contributor address; City; State; Zip Code  Galveston, TX 77554	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Visit Galveston
Date 03/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Amanda <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78210	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Chief Public Affairs Officer		Employer (See Instructions) Texas Travel Alliance

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/5 Rpt: 6/9
<b>2</b> FILER NAME Texas Travel Alliance PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00069936
<b>4</b> Date 04/25/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jameson, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort worth, TX 76102	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) President & CEO		<b>9</b> Employer (See Instructions) Visit Fort Worth
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKenzie, Ronald <hr/> Contributor address; City; State; Zip Code  Cedar Hill, TX 75104	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Director of Marketin		Employer (See Instructions) ProPark Attractions Group
Date 03/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrow, Tim <hr/> Contributor address; City; State; Zip Code  Boerne, TX 78006	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) President/CEO		Employer (See Instructions) San Antonio Zoo
Date 04/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osborne, John <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79401	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) President & CEO		Employer (See Instructions) Visit Lubbock
Date 03/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Sarah <hr/> Contributor address; City; State; Zip Code  Round Rock, TX 78665	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Heritage Tourism Program Coordinator		Employer (See Instructions) Texas Historical Commission

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/5 Rpt: 7/9
<b>2</b> FILER NAME Texas Travel Alliance PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00069936
<b>4</b> Date 03/27/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramos, Aileen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Laredo, TX 78041	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Laredo CVB Director		<b>9</b> Employer (See Instructions) Laredo Convention & Visitors Bureau
Date 04/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rotella, Rachel <hr/> Contributor address; City; State; Zip Code  Grand Prairie, TX 75052	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions) Ripley Entertainment
Date 04/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schultz, Paul <hr/> Contributor address; City; State; Zip Code  Houston, TX 77001	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) V.P. Hospitality, Landry's Hotel Div		Employer (See Instructions) Landrys, Inc.
Date 04/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kashion <hr/> Contributor address; City; State; Zip Code  Amarillo, TX 79102	Amount of Contribution (\$)  \$85.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Amarillo CVB
Date 04/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stawar, Brett <hr/> Contributor address; City; State; Zip Code  Port Aransas, TX 78373	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) President & CEO		Employer (See Instructions) Port Aransas/Mustang Island Tourism Bureau

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/5 Rpt: 8/9
<b>2</b> FILER NAME Texas Travel Alliance PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00069936
<b>4</b> Date 04/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Werner, Aaron <hr/> <b>6</b> Contributor address; City; State; Zip Code  McKinney, TX 75069	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Executive Director		<b>9</b> Employer (See Instructions) Visit McKinney
Date 04/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wuest, Brad <hr/> Contributor address; City; State; Zip Code  Natural Bridge Caverns, TX 78266	Amount of Contribution (\$)  \$125.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Natural Bridge Caverns



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/1 Rpt: 9/9	<b>2</b> FILER NAME Texas Travel Alliance PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00069936
<b>4</b> Date 03/31/2025	<b>5</b> Payee name CardConnect/BluePay	
<b>6</b> Amount (\$) \$66.77  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code Blue Pay Processing 184 Shuman Boulevard, Suite 350 Naperville, IL 60563	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/04/2025	Payee name Governor For A Day - Brandon Creighton	
Amount (\$) \$2,500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1005 Congress Ave. Suite 400 Austin, TX 78701	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation made to Governor for A Day Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held